

AN IMPORTANT NOTICE ABOUT CHANGES IN MONTANA MEDICAIDS “YOUR NEW HANDBOOK”.



EPSDT SERVICES

What You Should Know:

- Your child should have lead toxicity screening at ages one and two, or up to 72 months if not previously tested. (pg 21)
- When you take your child to a well child check up, you should take your child’s Medicaid card and any immunization records with you. (pg 32)
- If you need assistance in finding providers who will care for your child, scheduling appointments, or transportation, you can call 1-800-362-8312 or 1-406-444-4540. (pg 32)
- **An EPSDT exam, or well child appointment**, is for children age 20 and under. A well child exam should have: a head-to-toe unclothed physical exam, eye exam, hearing check, nutrition check, growth and development check, blood and urine tests, immunizations (if needed), and a speech and language check. A complete history of your child’s health and growth will be taken to find and treat physical illness, mental illness, or disabilities.
 - **Vision screens** should be appropriate to the age of the child and should be conducted at each Well Child Screen. If the child is uncooperative, rescreen within six months.
 - **Hearing screens** should be appropriate to the age of the child and should be conducted at each Well child Screen. All newborns should be screened.
 - **Dental screens** should be performed by a child’s dentist when the first tooth erupts and every 6 months thereafter.
- During the well child appointment, you will receive health education and guidance to help you monitor your child’s development. If any problems are found during the check-up, your child will be referred to the right provider for further exams and possible treatment. (pg 32)



MEDICAID SERVICES

What You Should Know:

- Dental services are not covered for adults on **Basic Medicaid** except: when dental services are necessary to seek or maintain employment. Emergency dental care is covered only when related to emergency treatment. (pg 35)
- Eye exams on **Full Medicaid** allows for one exam every 24 months for age 21 and older. Additional exams are covered when medically necessary for age 21 and older; if there is a major change in your prescription or you have had cataract surgery. One exam every 12 months is allowed for age 20 and under. Additional

exams are covered for eye disease or injury or if there are additional screenings that needs to be done. (pg 36)

- Eyeglasses on **Full Medicaid** allows for one pair every 24 months for age 21 and older. One pair every 12 months is allowed for clients age 20 and under. Additional replacement frames in these time frames will need to be prior authorized by the Department for medical necessity. (pg 36)
- Transportation can be provided as non emergency and as needed to get necessary covered services closest to you when there is no other way to pay for transportation. The number to call for these services: 1-800-292-7114. (pg 41)



SUBSTANCE DEPENDENCY SERVICES (full benefits only) alcohol and other drugs

What You Should Know:

- **Outpatient Treatment –**
 - **Outpatient** – covered for clients age 21 and over with a substance dependency diagnosis and for clients age 20 and under with a substance dependency or abuse diagnosis. Services are provided on a regularly scheduled basis to clients residing outside a program. The services include crisis intervention, counseling, chemical dependency education, referral services, and client follow up after discharge. (pg 51)
 - **Intensive outpatient** – treatment for persons requiring a structured outpatient program providing at least 10-30 hours of counseling and chemical dependency education services per week for duration of four to six weeks. Services include assessment; group, individual and family counseling; chemical dependency education; referral and discharge. (pg 51)
- **Inpatient Treatment –**
 - **Inpatient Hospital** – treatment for persons requiring 24-hours-a-day, 7-day-a-week supervision in a licensed hospital or suitably equipped medical setting. Covered services include inpatient help with drug or alcohol addiction. Services must be ordered by a licensed addiction counselor and determined medically necessary for the client. Prior authorization is required. (pg 50)
 - **Inpatient Free standing** – services for persons requiring 24-hour supervision in a community based residential setting. Includes physical exam; chemical dependency education; organized individual, group, and family counseling; discharge referral to necessary supportive services; and client follow-up. (pg 50)
 - **Day Treatment** – (no overnight stay) services for clients age 20 and under who require a more intensive treatment than intensive outpatient but who do not require 24 hour- hours-a-day treatment. Day treatment consists of at least five hours of contact time per day for at least four days per week.

This service is available only to those who have completed substance dependency inpatient treatment. Prior authorization is required.(pg 50)



PRESUMPTIVE ELIGIBILITY – (for pregnant women applying for Medicaid)

What You Should Know:

- If you are pregnant you can apply for Medicaid at a Qualified Presumptive Eligibility Provider. (QPEP) Your application will be sent to your County Office of Public Assistance to be processed. If the QPEP determines you are probably eligible (presumptive eligibility) you can get prenatal care during the application process. If Medicaid determines you are eligible for Medicaid, you will no longer be presumptively eligible and will receive FULL Medicaid benefits, with Medicaid benefits lasting at least through the pregnancy with 60 days postpartum coverage. If Medicaid determines you are NOT eligible for Medicaid, your prenatal care will no longer be covered by Medicaid. If you are determined to have presumptive eligibility but do not send in an application for Medicaid, your prenatal care will be covered through the last day of the month FOLLOWING the month in which you were determined to be presumptively eligible. The provider needs to verify eligibility before providing any service during the presumptive eligibility period. There is no cost share for this service. (pg 59)